PART B - FEE(S) TRANSMITTAL

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or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address an international control of the current correspondence address and maintenance fees and made (b) indicating an extract FEE ADDRESS' for maintenance fees and the (b) indicating the FEE ADDRESS' for maintenance fees and the (b) indicating the FEE ADDRESS' for maintenance fees and the (b) indicating the FEE ADDRESS' for maintenance fees the ADDRESS for maintenance fees the FEE ADDRESS for maintenance fees the feet of the FEE ADDRESS for maintenance fees the FEE ADDRESS for maintenance fees the feet of the FEE ADDRESS for maintenance fees the

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 10/06/2009 26646 7590 Certificate of Mailing or Transmission I hereby certify that this Feed's Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address nbove, or being facsimile transmitted to the USPTO (571) 273-2285, on the date indicated below. KENYON & KENYON LLP ONE BROADWAY NEW YORK, NY 10004 (Depositor's name (Signat Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. 10/524.217 09/14/2005 Boris Adam 10191/3723 1011 TITLE OF INVENTION: DEVICE FOR IMPACT SENSING HAVING AT LEAST TWO PRESSURE SENSORS

	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE		DATE DUE	
	nonprovisional	NO	\$1510	\$300	\$0	\$1810		01/06/2010	_
	EXAMINER		ART UNIT	CLASS-SUBCLASS					
	SUGLO, JANET L		2857	702-047000	-				_
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.503). Change of correspondence address (or Change of Correspondence Address form PTOCSPI (22) stached. J Tee Address' indication (or "Fee Address" Indication form PTOCSPI (22) or more recent) attached. Use of a Castomer Number is required.			For printing on the patent front page, list (1) the names of up to 3 registered potent attorneys or agento RA, alternatively, (2) the name of a single firm (having as a member a registered nationary or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2	&	KENYON	_LLP _ 	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									

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Please check the appropriate assignee category or categories (will not be printed on the patent) : 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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